PTC/SB/06 (12-04)
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U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

titles user aparticular ACI til 1993, in persons are required to respond to a coraction of information unless										
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application of Docket Number 10 724132			
APPLICATION AS FILED - (Cotumn 1)			- PART I (Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
FOR NUMBER FILED		NUM	NUMBER EXTRA		RATE (\$)	FEE (\$)	1	RATE (\$)	FEE (\$)	
BASIC FEE: (37 CFR 1.16(a), (b), or (c))			•	1		1,521,07	1	141.214	102(4)	
SEARCH FEE (37 CFR 1.16(k), (1), or (m))				1			1			
EXAMINATION FEE (37 CFR 1.15(o), (p), or (q))				1			1			
TOTAL CLAIMS (37 CFR 1.16(i))	irinus 2			_	=				 	
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus			1 ^			OR	x =		
	If the specification	and drawings	exceed 100	1 F				X *	 	
APPLICATION SIZE . FEE	sheets of paper, to is \$250 (\$125 for	small entity) for	r each							
(37 CFR 1.16(s))	additional 50 shee 35 U.S.C. 41(a)(1	ts or fraction # (G) and 37 CF	nereof. See R 1.16(s).		I			ĺ		
MULTIPLE DEPENDENT	•		厂		· · ·		· .			
* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL			****		
APPLICATION AS AMENDED – PART II										
		(Column 2)			SMALL ENTITY		OR	SMALL I		
∢ RE	EMAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	۱	RATE (\$)	ADDI- TIONAL	-	RATE (\$)	ADOI- TIONAL	
	24 Minus	- 28	- A	×		FEE (\$)		. Σ Λ .	FEE (3)	
Independent (17 OFR 1.15(h))	2 Minus	17	- ()	×			OR	x 200 =	\/	
Application Size Fee (37 CFR 1.16(s))				Ĥ			OR	× 200 =	-X-	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))				T		OR				
					TAL O'L FEE		OR	TOTAL ADD'L FEE		
20-53-01	kumn 1)	(Column 2)	(Column 3)		_					
	LAIMS MAINING	HIGHEST NUMBER	PRESENT .		ATE (3)	ADDI-	ſ	RATE (\$)	ADDi-	
	NTTER NOMENT	PREVIOUSLY PAID FOR	EXTRA			TIONAL FEE (\$)			TIONAL FEE (\$)	
Total of crr (.16(p) C (.16(p)) C	Minus	<u>-</u> 26	*	×	= \		OR	x =		
CIT CFR 1.14(N)	2 Minus	12	=	×	- 1		OR	X		
						abla	~~` <u> </u>			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))							OR			
				AD	TAL D'L FEE		OR	TOTAL ADO'L FEE		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".										
*** If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, arter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

This collection of information is required by 37 (FR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.